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tube, containing more spinal fluid than the first, is reserved for these two delicate tests, the first tube being probably contaminated each time fluid was withdrawn for cell count and globulin determination.

By the results of such a complete analysis as just outlined, together with a complete physical and neurological examination, the diagnosis early of impending cerebro-spinal syphilis is facilitated, and the diagnosis in advanced cases is confirmed.

Seldom will the nurse be entrusted with the preparation of the salvarsanized serum, so the technic need not be given here, further than to mention that the blood from the patient is collected in a sterile, dry, 50 c. c. centrifuge tube provided with a sterile cork.

For the intraspinal treatment, the nurse should add to the lumbar puncture tray, a small gravity tube, outlet at the bottom, with six inches of rubber tubing fitted with a male connection for the hilt of the lumbar puncture needle. A 30 c. c. glass barrel of a syringe does exceptionally well, with the rubber tube having a female connection to fit the syringe, and a male connection to fit the needle.

Following treatment, the patient receives the routine described after ordinary lumbar puncture.

MAINTAINING STANDARDS IN SMALL HOSPITALS AND TRAINING SCHOOLS¹

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This is a problem and not a small one. In these days of centralization and concentration to secure business efficiency, the situation of the small hospital is unique. The last survey made by the American Hospital Association shows the entire number of hospitals in the United States to be 7,158, and of these, 3,004 have a capacity of less than 25 beds, 2,919 having a bed capacity of from 25 to 100. Therefore, the small hospital seems to be playing a very definite part in the conservation of the health of the nation.

What are the minimum standards necessary for a hospital? According to the American College of Surgeons, these are: First, a hospital must be equipped to give the community reasonable service in medical, surgical and obstetrical wards. Second, it must have a well organized staff which holds regular meetings, gives evidence of

¹ Read at the annual meeting of the Illinois State Association, Moline, December 4 and 5.

staff team work, and shows an interest in professional advancement and research work. Third, there must be data as to medical, surgical and obstetrical case records of all cases treated in the hospital. Fourth, there should be adequately equipped laboratories and X-ray departments, with a trained technician in charge, under direction of the pathologist and radiographer. Fifth, There must be a training school for nurses able to provide a well rounded theoretical course and to offer an active practical service.

Out of the war has come a new viewpoint of many problems and possibly that of public health is not the least. In the past the health of the individual has been assumed to be the responsibility of that individual,—to-day, we feel it is that of the community. Then, the community should feel the responsibility of the hospital as being the receiver of its bankrupt members, so far as health is concerned. It is the hospital's duty to restore these individuals to a former semblance of health and vigor, that they again may perform their part as citizens. The hospital is, then, not only a public benefactor, it is one of the community's soundest business institutions and should be conducted as such.

Many of our small hospitals are staggering under inadequate endowments and are bound by traditional ideals of rendering service to the sick without sufficient remuneration; consequently their buildings are inadequate, with insufficient equipment, and good service is impossible, because funds are not available. Because of this, many hospital authorities are recommending that the hotel plan be adopted in conducting a small hospital, a budget being planned which will provide for the room, board, laundry, service, and other incidentals in the care of the patient, and a sufficient allowance for up-keep; upon this to be based the rate of charge. Charity cases are to be cared for on endowed beds or through existing channels of charity organizations. Individuals entitled to county care should receive such, the county paying the existing ward rates for this care.

At first it may seem a cold business scheme, but it gives an opportunity to render more efficient service to the community which will be proud to have an institution which can compare favorably with the best. "Nothing succeeds like success."

To achieve these results the Board of Directors must have the coöperation of the Staff. They must see that the best interests of the hospital are their interests, that the welfare and contentment of the patient while in the hospital will have its influence on others who are in need of hospital care.

The Staff must be zealous in holding its members to the highest standards of work by regular staff meetings and discussion of

methods best suited to meet the needs of the community. The busy physician in an open staff hospital, as most of our middle-western hospitals are, does not always feel the need of writing a case history for the hospital, although he has it for his own office record. A simplified form and possibly a dictaphone or extra clerical help should make this possible. These case histories should be filed, and if possible a follow-up system should be devised that they may be available material.

The clinical laboratory will probably have its beginning in a very small way, sufficient for clinical medicine, but with a trained technician in charge, it should educate the staff to expect a more scientific basis for their diagnosis and thus establish public confidence.

And now comes what, to us, is the most vital part of the whole situation,—the training school for nurses. The nurse to-day is coming into her own; so many avenues are open to her, that it is difficult to choose, and still the three long years of training form a barrier which is keeping many promising young women from entering this field.

What can the small hospital offer when the larger teaching hospital with its well organized staff, its abundant equipment, and no financial burden, considers it a problem?

Again I repeat, it is the responsibility of the community. It is an educational institution which should be considered equal in importance to the school of agriculture, of business, of law, of dentistry, etc., and it must be financed accordingly. Its relationship is peculiarly with the hospital, as no plan of divorcing it from the partial apprenticeship of practical work has yet proven successful. The small hospital provides abundant clinical material—the human interest is there and more personal supervision is possible. The need is for instructors, satisfactory equipment, plenty of graduate supervisors, and more hospital workers to do the housekeeping work, that the nurses may have more actual time for nursing. Two plans have been suggested. One is that as the school's purpose is educational, a tuition fee should be charged, the work in the wards being considered as laboratory periods and credited as such. This would necessitate more thorough supervision, and would call for standardized equipment and nursing technique, and shorter hours of practical work.

The other plan has the same goal in view, but retains many of the old features and depends on a separate endowment for the training school or an increased budget for the hospital which will provide the educational features for the school.

It seems that with the assistance which is being given us by the Department of Registration and Education, some plan should be

formulated whereby the training school will be a decided link in the great scheme of education which our State is offering its young people. With a standard course of instruction and a full time instructor in the small school, the hours for theoretical work will not be encroached upon by the increasing demands for practical service, and there is an added dignity to the practical work because the student is made to realize the scientific value of the work she performs. In order to carry out the treatment on the ward as it has been demonstrated in the class-room, standardized equipment will be required throughout the hospital. The physician will be quick to appreciate the benefit derived for his patients, and thus his coöperation and the standardizing of routine treatments can be secured.

Although the eight-hour plan is not yet in operation in the majority of our hospitals, these conditions will help to bring it about. In one small hospital it is being accomplished by allowing three hours off duty on days without class periods and three and a half hours when there are class periods. One of the day nurses has four hours off in the afternoon and remains on the floor until nine o'clock p. m., not reporting for duty the next morning until eight o'clock. With the allowance for the midnight supper, the night nurses are on actual duty a little over nine hours. This plan has been in operation almost a year and has proven beneficial in every way,—it permits more time for recreation and study, makes it easier to plan for class and lecture periods, and gives real students instead of fagged pupils. No more nurses are required, but some of the housekeeping work has been eliminated by providing extra maids to care for the cleaning of rooms and furniture and routine work in duty rooms.

The night cook who provides a regular dinner for the midnight meal, has been the means of providing enough jellies, jams and preserves to serve the nurses' dining room throughout the winter; she also helps prepare the breakfast; in this way the day cook need not report for duty so early.

This may seem a very homely suggestion and yet it is helping to maintain standards by keeping the workers happy and contented.

The system of records planned by Miss Bell for the Training School can be used very successfully in the small school, as they are concise and in such a form that they do not require too much of the time of the busy superintendent of nurses.

Thus the small school has its advantages, and can play its part in preparing young women for that "finest of all arts," the care of the temple of the Soul and to be, indeed, true followers of the Lady of the Lamp,—Florence Nightingale.